

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. <i>9/890029</i>	FILING DATE
						APPLICANT(S)	
CLAIMS							
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		
	IND.	DEP.	IND.	DEP.	IND.	DEP.	
1							51
2							52
3							53
4							54
5							55
6							56
7							57
8							58
9	/						59
10	/						60
11	/						61
12	/						62
13	/						63
14	/						64
15	/						65
16	/						66
17	/						67
18	/						68
19	/						69
20	/						70
21	/						71
22	/						72
23	/						73
24	/						74
25	/						75
26							76
27							77
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30							80
31							81
32							82
33							83
34							84
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36							86
37							87
38							88
39							89
40							90
41							91
42							92
43							93
44							94
45							95
46							96
47							97
48							98
49							99
50							100
TOTAL IND.	5						
TOTAL DEP.	9						
TOTAL CLAIMS	14						

PTO-1350 (3-78)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

U.S. DEPARTMENT OF COMMERCE

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